

REMARKS

Prior to this Amendment, Claims 1-39 were pending in the application. By this Amendment, Applicants have amended Claims 1, 15, 22 and 28, canceled Claims 35-39, and added new Claims 40-43. No new matter has been added by the Amendment. Reexamination and reconsideration in view of the amendments and remarks contained herein are respectfully requested.

I. Claims 1 and 28

Claims 1 and 28 have been amended to include, among other elements, “establishing an electronic healthcare marketplace operated by at least one marketplace operator,” the electronic health care marketplace “providing a contact template usable by at least one of a prospective healthcare service provider and a prospective patient to submit a request for information to the at least one marketplace operator in order to obtain information about the healthcare marketplace.”

With respect to the references cited by the Office, none of them teach or suggest establishing an electronic healthcare marketplace operated by at least one marketplace operator that provides a contact mechanism usable by prospective users to request information regarding the marketplace from the operator of the marketplace. For example, U.S. Published Patent Application No. 2002/0065758 in the name of Henley (hereinafter referred to as “Henley”) discloses “web page based online ‘feedback’ mechanisms for both the patient and the provider” (paragraph 134, lines 1-3). As shown in an example feedback form illustrated in FIG. 18, the feedback form allows “a registered bidder to select various predefined descriptions of the bidder’s perceived quality of service provided by a particular service provider” (paragraph 134, lines 7-9). In addition, as shown in another example feedback form illustrated in FIG. 19, the feedback form allows “a service provider to provide comments/feedback regarding a particular patient” (paragraph 135, lines 1-3). These feedback mechanisms are used to provide information after the fact - not to ask questions beforehand. In addition, the “feedback” mechanisms disclosed in Henley are provided to registered patients and registered service providers that have already used the system disclosed in Henley to establish a relationship with another registered patient or another registered service provider. They are not used by prospective users.

FIG. 10 of Henley “shows a hierarchical diagram of linked Internet ‘web pages’” (paragraph 118, lines 1-2). As shown in FIG. 10, the web-pages include registration or log-in web-pages for visitors or new users, but do not include any contact web-pages prospective users; and prospective users and new users are not the same. Thus, Henley did not contemplate providing a contact template usable by a prospective user to obtain information about the system. Therefore, Henley and the other references previously cited by the Office do not teach or suggest providing contact templates or forms to prospective users that the users can use to obtain information from a marketplace operator before participating in the marketplace.

In addition, Claims 1 and 28 have been amended to include “providing...a proposal response template...having a physician section for specifying a name, medical education information, certification information, and healthcare practice information for...[a] healthcare service provider and at least one proposed procedure period suggested by the...healthcare service provider and a facility section for specifying procedures performed information and non-clinical services information for a facility associated with the...healthcare service provider, the non-clinical services information including at least one of travel arrangement assistance availability, private room availability, translator availability, childcare availability, eldercare availability, and guest accomodation availability.”

Henley, the Bid for Surgery website pages, and the other references previously cited by the Office do not teach or suggest providing a proposal response template to a healthcare service provider as defined in Claims 1 and 28. Henley only discloses that a medical service provider provides an offer to sell in response to a registered buyer’s purchase offer that includes “the location and the date that the services will be rendered” (paragraph 104, lines 16-17). Henley does not teach or suggest providing a template to a medical service provider that requests facility information from the medical service provider, such as procedures performed information, and non-clinical services information. Furthermore, Henley does not teach or suggest a medical service provider providing non-clinical services information such as travel arrangement assistance availability, private room availability, translator availability, childcare availability, eldercare availability, and guest accomodation availability, as recited in Claims 1 and 28.

Similarly, the Bid for Surgery website discloses providing a doctor with “72 hours to view the patient’s requirements and personal/medical form” and “respond to the patient with a bid price for the procedure and their own credentials” (Bid for Surgery, How it Works, paragraph 7). However, the Bid for Surgery system does not provide a response template to a doctor that requests at least one proposed procedure period and information about a facility associated with the doctor, such as procedures performed information and non-clinical services information. Additionally, the Bid for Surgery system does not request non-clinical services information from a doctor that includes at least one of travel arrangement assistance availability, private room availability, translator availability, childcare availability, eldercare availability, and guest accomodation availability as recited in Claims 1 and 28.

Beyond these specific points, none of the references previously cited by the Office teach or suggest the combination of the elements as recited in Claims 1 and 28. In particular, the Bid for Surgery website provides a broad overview of an online bidding system, but does not contemplate particular features of such a system, such as the combination of features recited in Claims 1 and 28. Merely providing a basic online bidding system for procuring medical services does not teach or even suggest providing a complete system with a combination of features and functionality as recited in the amended claims. Therefore, none of the references teach or suggest providing a complete system with the combined features as recited in Claims 1 and 28 for selling healthcare services to a patient.

Consequently, for at least the reasons set out above, independent Claim 1 and dependent Claims 2-14 and 40, which depend on Claim 1, and independent Claim 28 and dependent Claims 29-34 and 41, which depend on Claim 28, are allowable.

II. Claim 15

Like Claim 1, Applicants have amended Claim 15 to include “at least one marketplace operator” and “a contact mechanism for providing a contact template usable by at least one of a prospective patient and a prospective healthcare service provider to submit a request for information to the at least one marketplace operator.” As described above with respect to Claims 1 and 28, none of the references previously cited by the Office teach or suggest providing contact

templates or forms to prospective users that the users can use to obtain information from a marketplace operator.

In addition, Applicants have amended Claim 15 to include “a proposal construction engine for providing a proposal response template...having a physician section for specifying a name, medical education information, certification information, and healthcare practice information for...at least one of the healthcare service providers and at least one proposed procedure period suggested by the at least one of the healthcare service providers and a facility section for specifying procedures performed information and non-clinical services information for a facility associated with the at least one of the healthcare service providers, the non-clinical services information including at least one of travel arrangement assistance availability, private room availability, translator availability, childcare availability, eldercare availability, and guest accomodation availability.” As also described above with respect to Claims 1 and 28, none of the references teach or suggest providing a response template to healthcare service providers that requests at least one proposed procedure period and procedures performed information and non-clinical services information for a facility associated with the healthcare service provider, wherein the non-clinical services information includes at least one of travel arrangement assistance availability, private room availability, translator availability, childcare availability, eldercare availability, and guest accomodation availability.

None of the references teach or suggest a complete system for selling healthcare services with the combined features recited in Claim 15.

Therefore, for at least the reasons set out above, independent Claim 15 and dependent Claims 16-27 and 42, which depend on Claim 15, are allowable.

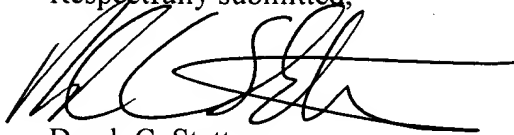
New Claim 43 includes limitations similar to those found in Claims 1, 15, and 28 plus additional limitations related to filtering unique identifying information in the process of preparing a case statement; preparing a first response that includes the total cost of a medical procedure, charges of a facility of the at least contracting healthcare service provider, and charges of principal professionals performing the healthcare services; and scheduling an outpatient visit with the patient and a staff member of the at least one contracting healthcare

service provider. None of the prior art teaches or suggests these features in combination with the other limitations of Claim 43.

III. CONCLUSION

In view of the above amendments and remarks, allowance of pending Claims 1-34 and 40-43 is respectfully requested.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Derek C. Stettner', written over a horizontal line.

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